



- This step sheet will help you increase formula for a participant when benefits for the current month have been issued and:
 - Greater than 7 days since First Date to Spend
 Or
 - Some benefits have been redeemed.
- If an infant needs more formula and it < 7 days since first date to spend and no benefits redeemed you can use <u>Cascades Steps Void and</u> <u>Reissue Benefits</u>.
- Normally you only increase formula when working with partially BF infant.
- For policy see <u>Chapter 23 WIC Foods and Ch. 24 Medical Documentation</u>

Steps	Cascades Screen
 Breastfeeding Review: Staff must complete a BF review to assess: Does infant need formula? How much formula is needed? 	 Note: Can only increase formula 2 times in a month for a breastfed infant. See policy Chapter 15 for Breastfeeding review process.
Please follow BF review process and stop here if no formula needed.	





2.	 Select Infant Icon: In family carousel, select infant's name. Important! Always prescribe the infant's food package before the BF participant to prevent system errors. 	DUCK Family Family ID: F0010000252 1234 FIRST ST OLYMPIA, WA 98513
3.	 : Update Infant Health Information Step A: In Quick Links, select Health Information. Step B: Under Breastfeeding Information, complete all BF and formula 	Certification Family Demographics Participant Demographics Income Information Health Information Anthro / Lab Breastfeeding Information DAISY DUCK
	questions. Note: BF Peer Counselors (BFPC) will document the same information in the BF Peer Counseling Care Plan section . Those responses will appear in Health Information . The CPA will verify information is correct.	Data Collection Date 7/15/2019 Breastfeeding Frequency More than 12 times in 24 hours Age Supplement Was Given Number of Wet Diapers / 24 hr Period Number of Stools / 24 hr Period Step B Orguinations Step B Orguinations Orguinations





	• Step C: Select Save.	Save Cancel Step C	
4.	 Select BF Participant: In family carousel, select BF participant's name. 	DUCK Family Family ID: F00100000252 1234 FIRST ST OLYMPIA, WA 98513	
5.	 Verify BF Participant Health Information: In Quick Links, select Health Information. 	Certification Family Demographics Participant Demographics Income Information Health Information Anthro / Lab	
	 Review BF information. You should see the same information you just entered into the infant's Health Information screen. If correct, select Save. 	Data Collection Date 7/15/2019 Image: Section Date Image: Section Date Image: Section Date Image: Section Date Image: Date Date Date Image: Date Date Date Image: Date Date Date Date Image: Date Date Date Date Date Image: Date Date Date Date Date Date Image: Date Date Date Date Date Date Date Date	No 🦱
		Save Cancel	

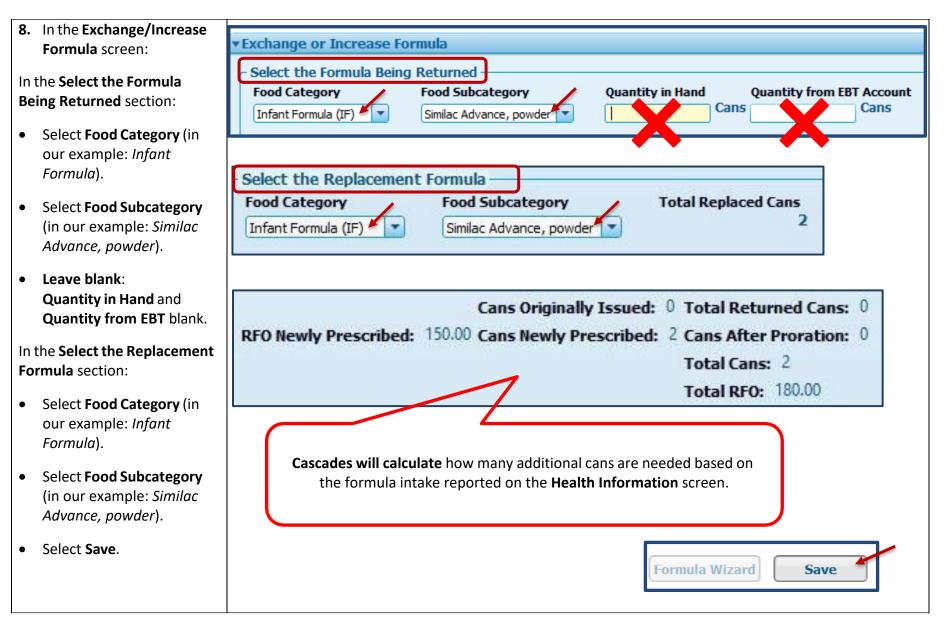




 6. Create New Infant Prescription: In family carousel, select infant's name. 	DUCK Family Image: Construction of the second s
 In Quick Links, select Prescribe Food. 	 ▼Food Prescription 7/15/2019 9/22/2019 11 1 to 3 Months 4 to 5 Months 6 t
 Click plus (+) sign to create a new prescription. 	Food Prescription Date WIC Category Age Category Breastfeeding Status Family Issuance Day Issuance Frequency 7/15/2019 Infant 1 to 3 Months Partially Breastfed <= half pkg 10 10 1 Month(s) * Food Prescription Items
• Select the desired formula.	Category Subcategory C ↓ Infant Formula (IF) Similac Advance Powder 12.4 oz ↓
• DO NOT make any other changes to the formula in the Food Prescription Items container.	Add Item to Food Prescription Category Subcategory Quantity Category Subcategory Quantity Category Subcategory Quantity Category Subcategory Quantity Category Category Category Quantity Category Category
• Save the new food prescription.	Infant Formula Similac Advance pwd Quantity 450 450 450 450 450 / 90 # Cans 450 450 450 450 / 90 5 15
7. Increase Formula:	🌮 Issue Benefits
 In Quick Links, select Exchange/Increase Formula. 	Prescribe Food Issue Food Instruments Food Instrument List Replace Current Benefits Exchange/Increase Formula











9. Confirm Formula Increased:	Family Food Instruments				
The system will redirect you to the Food Instrument List screen.	Serial # First Date to Spend	Last Date to Spend	Status	Issue Date	Print Date
 Status Message will confirm benefits issued successfully. Print Shopping List: 				essage Instrument was issued essfully.	
 Review and confirm that family benefits now include new 			Print Shopping Lis	t Void Selected	Replace Cancel
formula (Similac Advance).	7/15/2019 thru 8/9/2019	3905	3	Can S	imilac Advance, powder
If correct on shopping list, you know the benefits were successfully issued to the EBT account.					





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